

APPEAL FILING DEADLINE: JUNE 30, 2014

BOARD OF EQUALIZATIONAPPEAL OF REAL ESTATE ASSESSMENT

PARCEL ID #:	
PROPERTY ADDRESS:	
NAME OF OWNER OR AGENT: (If agent, owner authorization m	nust accompany this appeal)
MAILING ADDRESS:	
	(BUSINESS)
NATURE OF GRIEVANCEASSESSED IN EXCESS OFASSESSED INEQUITABLY	F FAIR MARKET VALUE Y WITH COMPARABLE PROPERITES
along with all supporting documentation The Assessor's Office will provide the	of Equalization, complete this form and return it, n, to the address listed below by JUNE 30, 2014 . Board with copies of office files and information crative appeal process. SUPPORTING
DOCUMENTATION: TWO (2) CONSUBMITTED IN ORDER TO AVOID IN	OMPLETE NUMBERED COPIES MUST BE INCURRING A COPYING CHARGE. You will be ne of the Board's sitting. Please direct questions
PRINTED NAME OF OWNER OR AGENT SIGNATURE OF OWNER OR AGENT:	: DATE:
	OF EQUALIZATION

10455 ARMSTRONG ST., RM. 238 FAIRFAX, VIRGINIA 22030